



### Acknowledgment and Receipt

**I have received my copy of the Employee Personnel Policies Manual (“Manual”).**

The Manual describes important information about Pittsylvania County, and I understand that I should consult with Human Resources regarding any questions not answered in the Manual. I have entered into my employment relationship with Pittsylvania County voluntarily and acknowledge that there is no specified length of employment. **Accordingly, either I or Pittsylvania County can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.**

This Manual and the policies and procedures contained herein supersede any and all prior practices, oral or written representations, or statements regarding the terms and conditions of your employment with Pittsylvania County. By distributing this Manual, Pittsylvania County expressly revokes any and all previous policies and procedures which are inconsistent with those contained herein.

I understand that, except for employment at-will status, any and all policies and practices may be changed at any time by Pittsylvania County. All such changes will be communicated through official notices, and I understand that revised information may supersede, modify, or eliminate existing policies.

**I understand and agree that nothing in the Manual creates, or is intended to create, a promise or representation of continued employment and that employment with Pittsylvania County is employment at-will, which may be terminated by either Pittsylvania County or myself. Furthermore, I acknowledge that this Manual is neither a contract of employment nor a legal document.**

I have received the Manual, and I understand that it is my responsibility to read and comply with the policies contained in this Manual and any revisions made to it.

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Employee Name (print)

Date

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Employee Signature

Date